



Division of Medical Services
Gainwell Technologies Provider Enrollment Unit
P.O. Box 8105, Little Rock, AR 72203-8105
P: (501) 376-2211 Toll-free: (800) 457-4454

Change of Ownership Information

All enrolled providers who have experienced a change in ownership or a change in tax number for the enrolled facility must complete the information below and submit to Provider Enrollment when making updates with Arkansas Medicaid.

Previous Owner Information
Organization name of the previous owner:
Arkansas Medicaid Provider number of previous owner:
Federal Tax Identification number of previous owner:

Effective Date or Anticipated Date Change Will Occur:

New Owner Information
Sole Owner New NPI:
OR
Replacing a Current Owner (joining current owners) Current Owners' NPI:
Organization name of the new owner:

Type of Sale that occurred

Was this a purchase of Assets? Yes No

Was this a purchase of Stock? Yes No

Other — explain

A copy of the sales agreement signed by all parties is required.

Name of Authorized Representative (typed or printed legibly)

Title

Signature

Date

We Care. We Act. We Change Lives.
humanservices.arkansas.gov